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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SEP 11 2003

In re U.S. Patent Application )

YOSHII *et al.* )

Application 09/554,186 )

Art Unit 1643

Filed: May 9, 2000 )

Examiner Betty J. Forman

For: BIOCHIP AND METHOD FOR USING THE SAME )

Attorney Docket No. HIRA.0081 )

Honorable Assistant Commissioner  
for Patents  
Washington, D.C. 20231

COVER LETTER

Sir:

[ x ] The fee for submission of additional claims is calculated as shown below:

| FOR   | TOTAL WITH<br>NEW CLAIMS<br>ADDED | TOTAL<br>CURRENTLY ON<br>FILE | CLAIMS PAID    | RATE    | CALCULATION |
|---|-----------------------------------|-------------------------------|----------------|---------|-------------|
| Total Claims  | 25                                | 25                            | 5<br>(Over 20) | x \$18  | 0           |
| Independent<br>Claims   | 3                                 | 3                             | 0<br>(Over 3)  | x \$84  | 0           |
| MULTIPLE<br>DEPENDENT<br>CLAIM(S)   |                                   |                               |                | + \$280 | 0           |
| REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).<br>IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED |                                   |                               |                | x ½     |             |
|   |                                   |                               |                | TOTAL   | 0           |

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

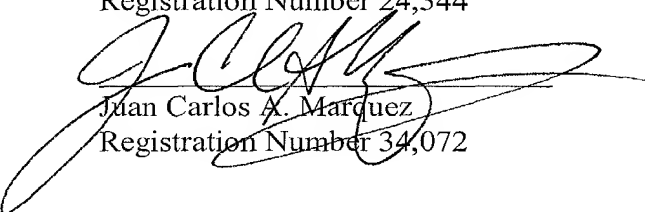
[ x ] Response to Office Action  
(with Claim Amendments)  
[ ] Information Disclosure Statement  
[ ] Preliminary Amendment  
[ ] Substitute Specification  
[ ] Other \_\_\_\_\_

[ ] Petition for Extension of Time  
[ ] Terminal Disclaimer  
[ ] Letter to Draftsperson  
[ ] Assignment  
[ ] Petition under \_\_\_\_\_

- [ ] Please charge my **Deposit Account Number** \_\_\_\_\_ in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
- [ ] A check in the amount of \$\_\_\_\_\_ to cover the additional claim fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, including patent application filing fees and processing fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
Stanley P. Fisher  
Registration Number 24,344

  
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Juan Carlos A. Marquez  
Registration Number 34,072

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**September 9, 2003**



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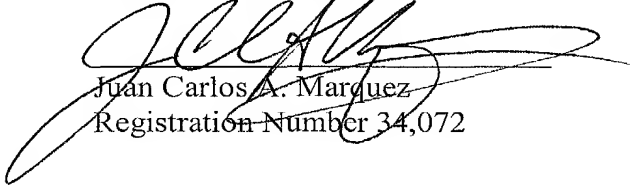
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**September 9, 2003**



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**RESPONSE AND AMENDMENT UNDER 37 C.F.R. §1.111**

Sir:

This is in response to the office action dated June 9, 2003, in the above identified application, the period for response is set to expire on September 9, 2003. Please amend the above identified application with the replacement paragraphs/sections/claims as follows: